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Complete if Known Substitute for form 1449A/PTO 09 / 514,465 **Application Number** INFORMATION DISCLOSURE 28-Feb-2000 Filing Date STATEMENT BY APPLICANT **First Named Inventor** Margaret Motamed Art Unit 2622 (use as many sheets as necessary) **Examiner Name** <u>Twyler Marie Lamb</u> Sheet Attorney Docket Number EFIM0069CIP

U.S. PATENT DOCUMENTS								
Examiner Initials		Document Number Number - Kind Code ² (if known	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear			
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Examiner Initials	Cite No. ¹	Foreign Patent Document Country Code ³ -Number ⁴ - Kind Code ⁵ (# known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	т,			
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		EP 578258A1	01-12-1994	Dennis					
		WO 96/01449	01-18-1996	Vatland et al.					
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Examiner Date 6/13/03 Considered Signature

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